POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ELIZA		105-11-01
D.I.P.E. CLASSIFIER	7 Kg.		102 42 61
ORMALITY REVIEW	J.	JC 8+3	107-07-01
RESPONSE FORMALITY REVIEW	ļ ~	ļ	

INDEX OF CLAIMS

	Rejected	N	Non-elected
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_	(Through numeral) Canceled	A	Ohiostad
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